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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000003761 (0)

1. Corporation Name

LADY DIANE BOAT COMPANY



Principal Place of Business

P.O. BOX 276
CORTEZ FL 34215

Mailing Address

P.O. BOX 276
CORTEZ FL 34215

3. Date Incorporated or Qualified

01/12/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

FELDMAN, MARC H
3808 26TH ST. WEST
BRADENTON FL 34205

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent or director (Type name)

(P.O. Box Number is Not Acceptable)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME BELL, CALVIN E
STREET ADDRESS 4600 124TH STREET WEST
CITY-ST-ZIP CORTEZ FL 34215

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13 STREET ADDRESS
14 CITY-ST-ZIP

2. TITLE
22 NAME
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24 CITY-ST-ZIP

3. TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

4. TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

5. TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

6. TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Calvin E. Bell 4-18-96 941-794-1245

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature

CR2E034 (12/95)